



Functional MRI at 7 Tesla

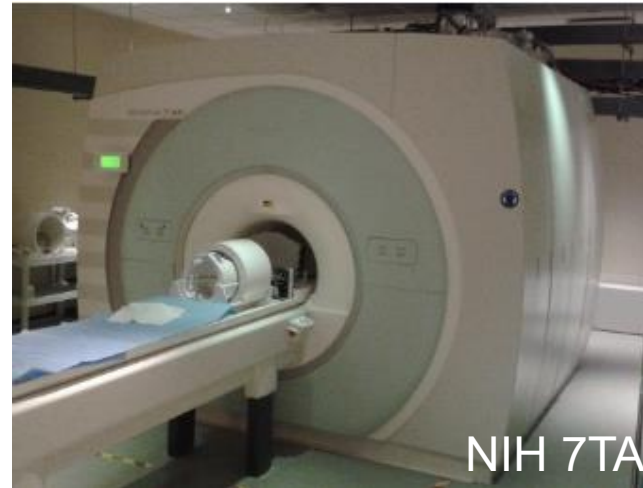
fMRI Summer Course 2026
Thursday, August 13

Tyler Morgan
Functional MRI Core Facility



Functional MRI at 7T (or even higher fields!)

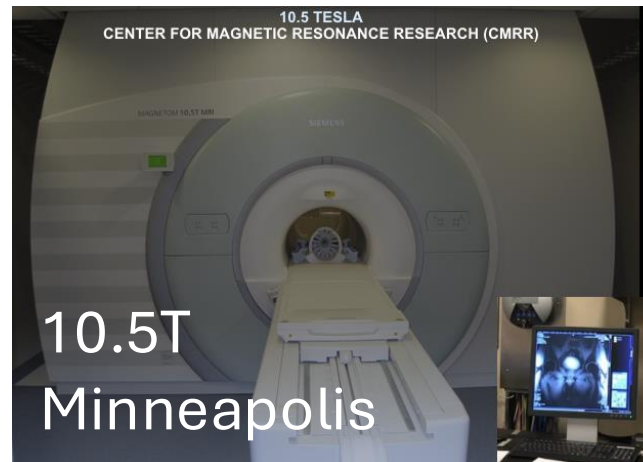
- We sometimes require higher resolutions or more signal than traditional fMRI can provide
- Typically, that means using an ultra high-field MRI machine
- These can include 7 Tesla, 9.4T, 10.5T, 11.7T, or even 14T!



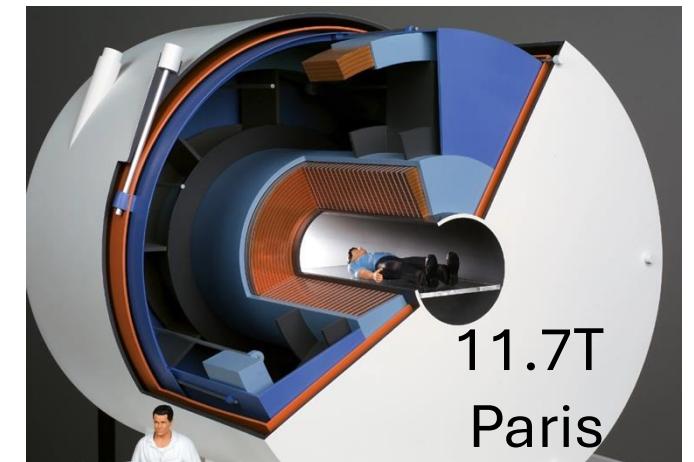
NIH 7TA



NIH 7TB



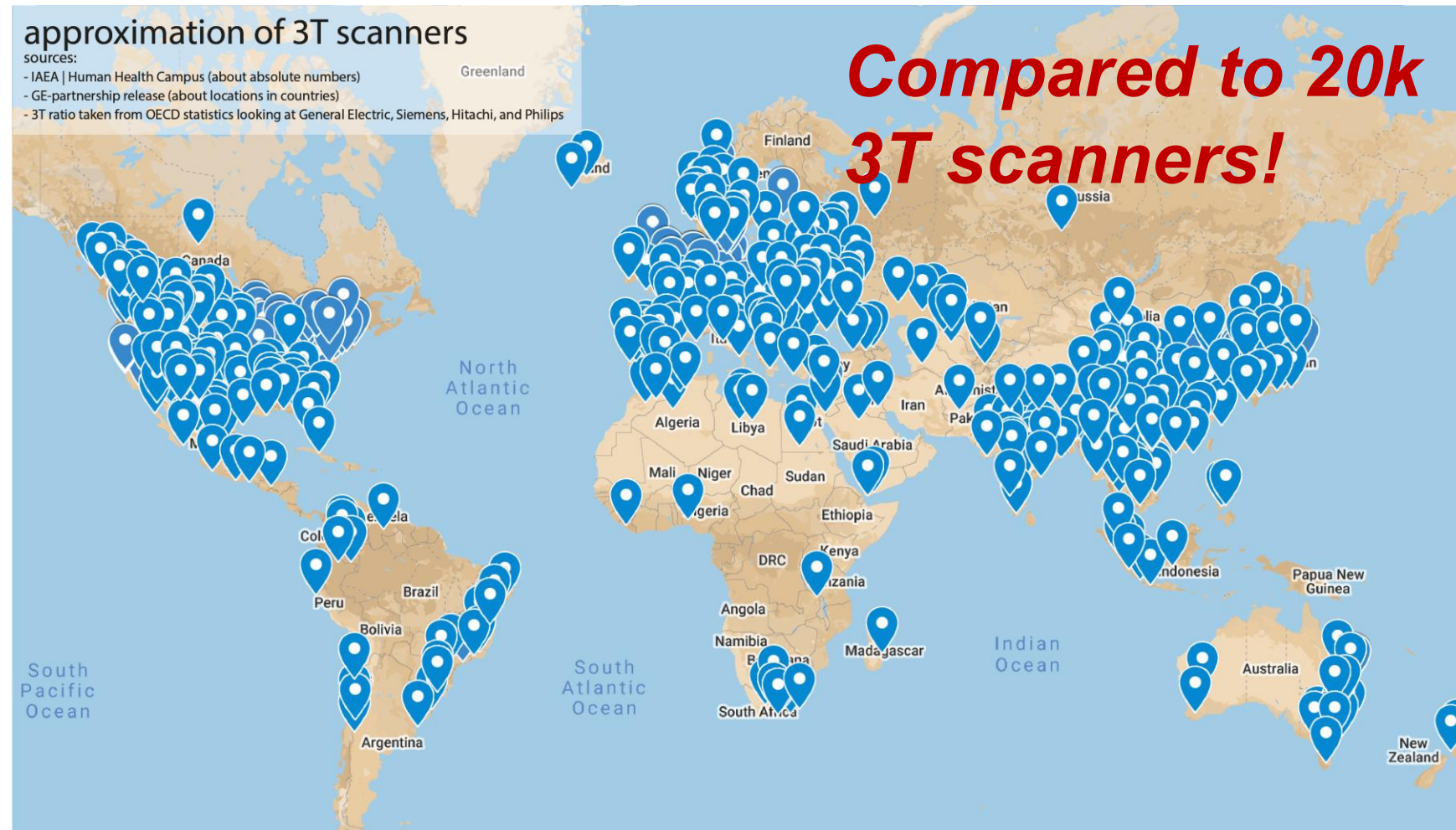
10.5T
Minneapolis



11.7T
Paris

Ultra high-field MRI around the World

- In 2015, there were approximately 40 human UHF MRIs in the world
- Today, there are about 140 of them!
- Nearly 45 of those are in North America
- ***And there are 3 downstairs!***



But why is it called Ultra High-Field MRI?

3-30 Hz	3-300 Hz	3-3000 Hz	3-30 kHz	3-300 kHz	300 kHz - 3 MHz	3-30 MHz	3-300 MHz	300 MHz - 3 GHz	3-30 GHz	30-300 GHz	300 GHz - 3 THz
$10^5 - 10^4$ km	$10^4 - 10^3$ km	$10^3 - 100$ km	100 - 10 km	10 - 1 km	1 km - 100 m	100 - 10 m	10 - 1 m	1 m - 10 cm	10 - 1 cm	1 cm - 1 mm	1 mm - 0.1 mm
ELF	SLF	ULF	VLF	LF	MF	HF	VHF	UHF	SHF	EHF	THF



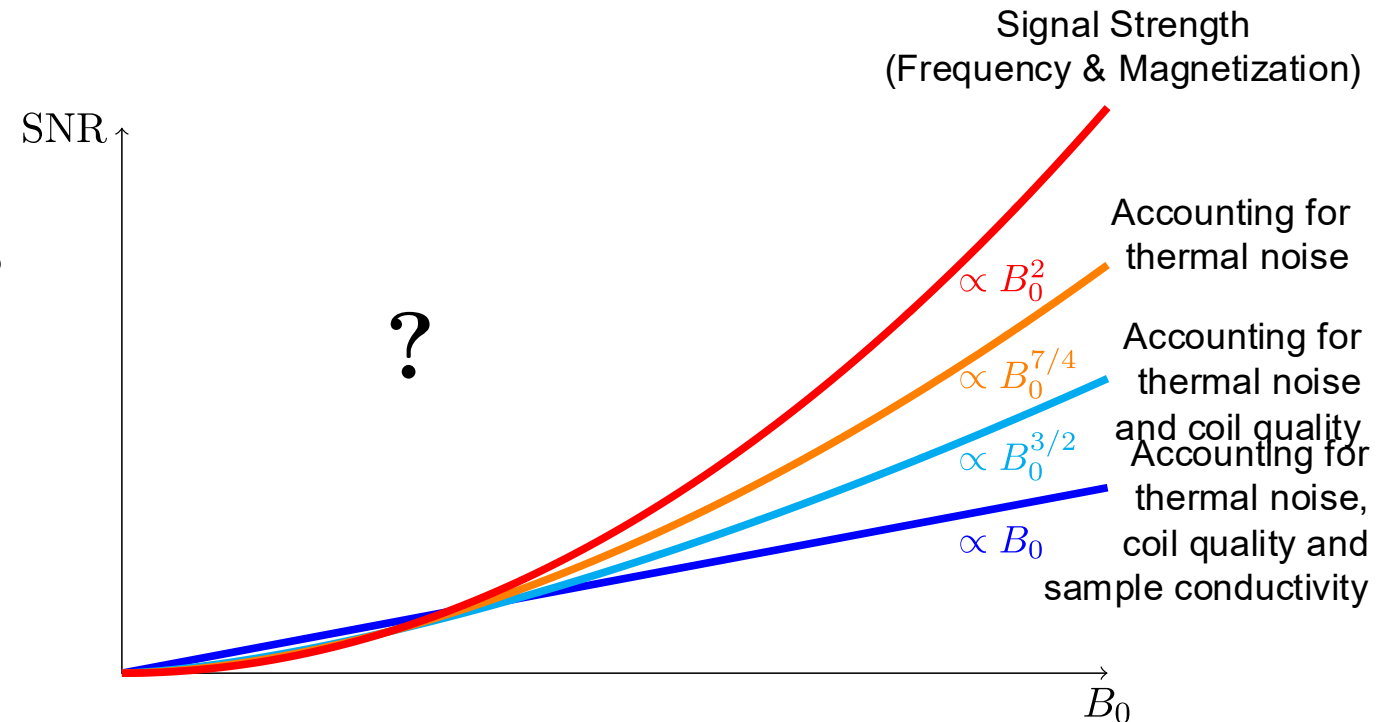
$$\gamma \times B_0 = 42.57 \text{ MHz/T} \times 7 \text{ T} = 297.99 \text{ MHz}$$

Close enough... 😊

Why Do People Use 7T?

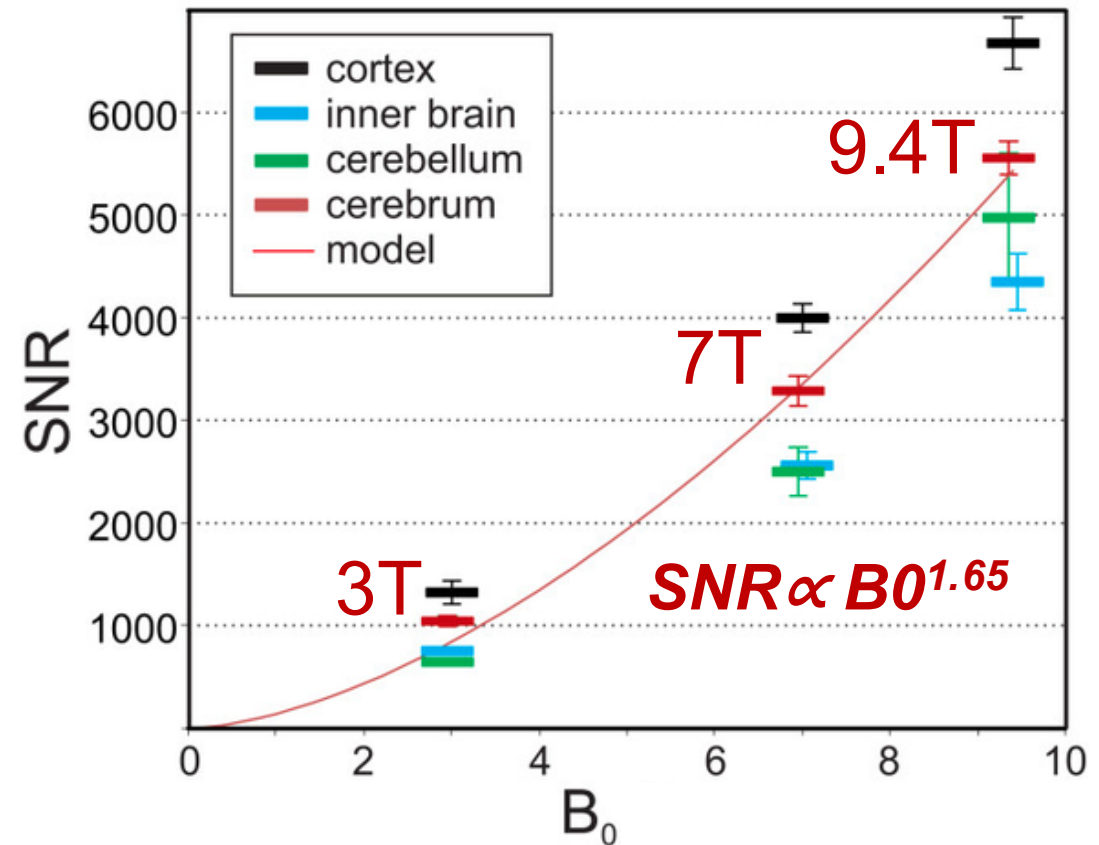
- So we go to higher field strengths (B_0), but why?
- The simple explanation is:

Signal increases with field strength!

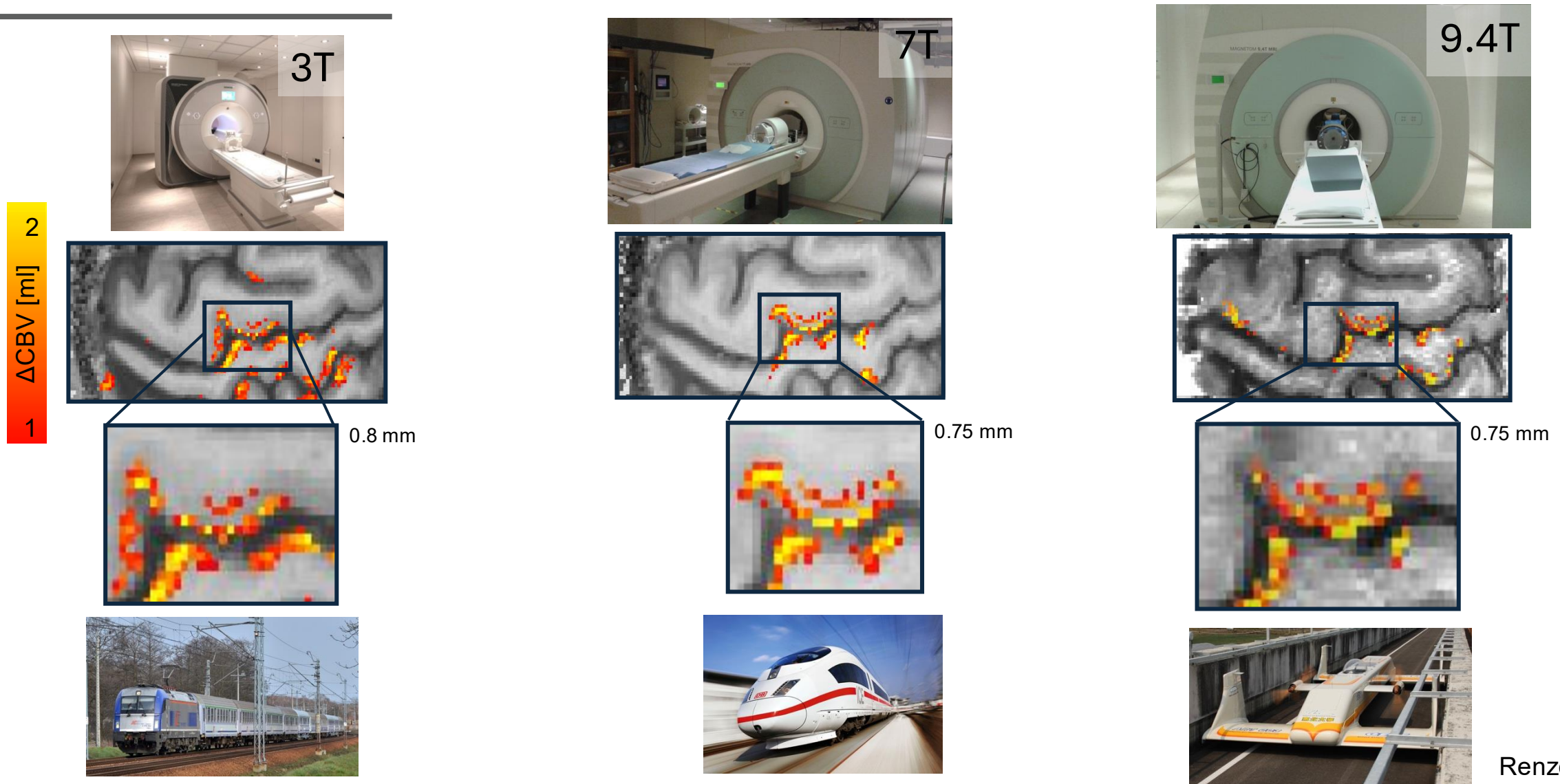


Signal Strength at 7T

- Empirical data seem to be something in the middle...
- This function makes 7T a good deal!
- We get a big increase in SNR compared to 3T, and we avoid the intense engineering challenges at higher magnetic fields

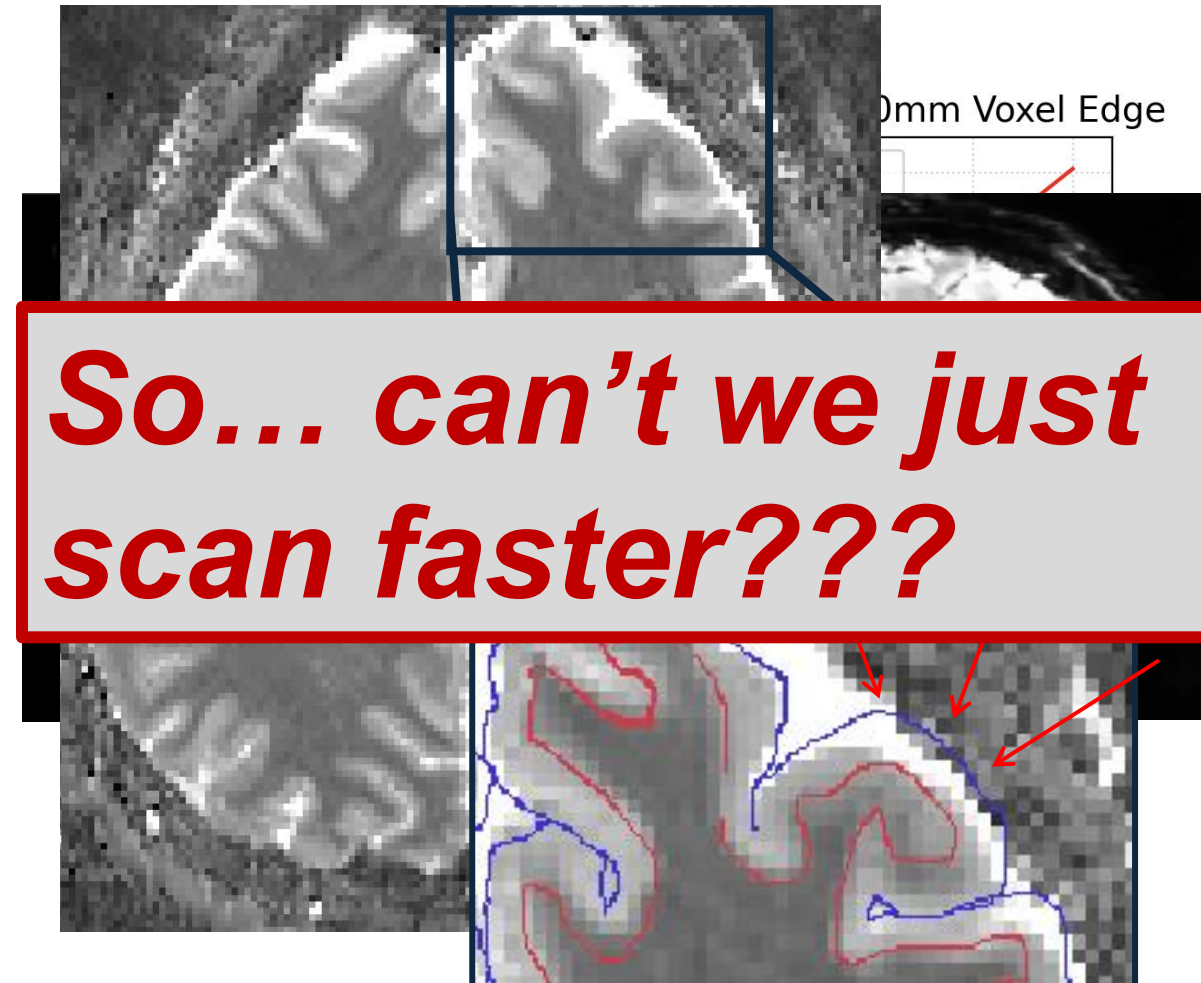


Field Strength of MRI

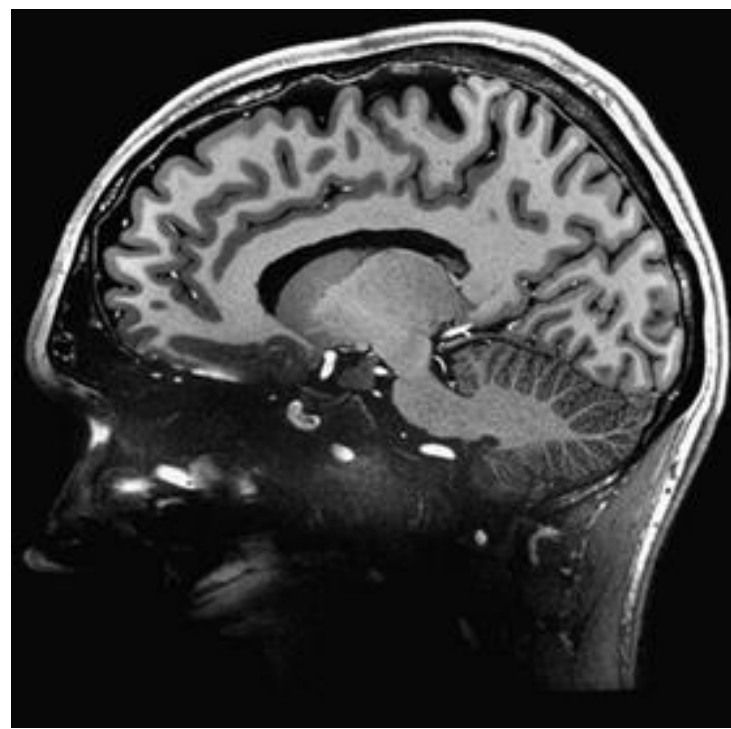
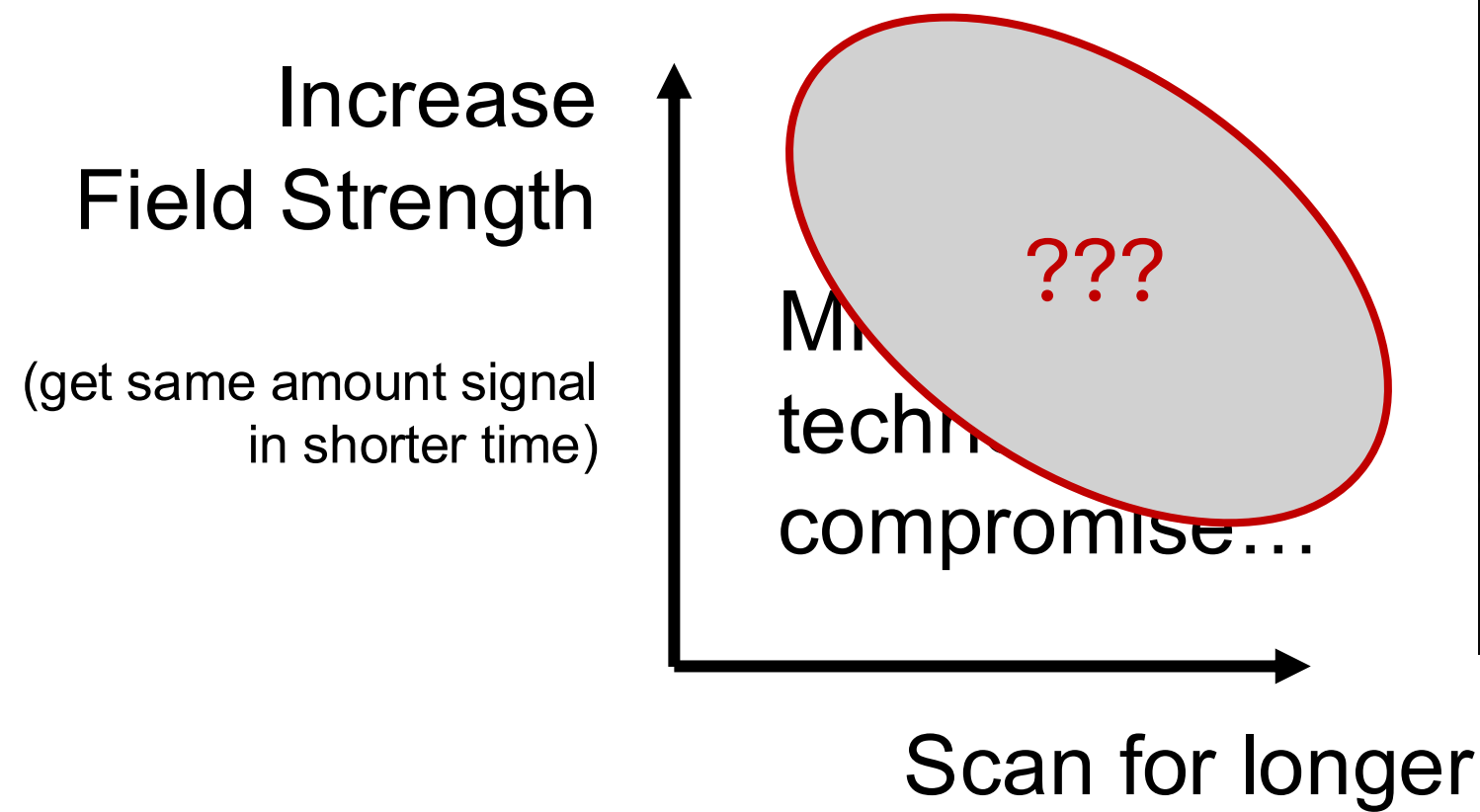


But 7T is not magic...

- It comes at a cost!
- Even though signal is higher, we lose it **faster!!**
- Plus, phase accumulates faster at 7T when reading out the same size voxels when shimming isn't perfect
- Together, these effects mean that if we cannot get through k-space fast, we will have image distortions
- Bad news if we care about small structures like cortical layers!



How do we image faster and increase resolution?

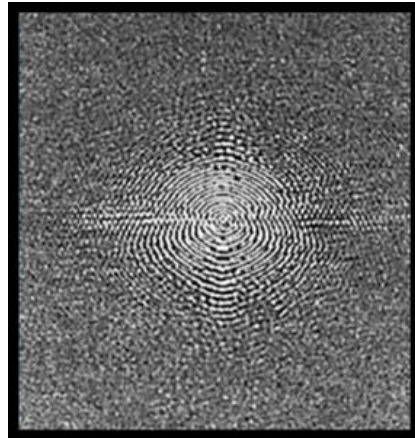


7T

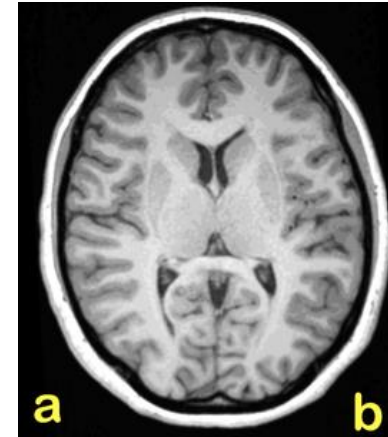
250 um, but **3.5** hours!

How do we image faster and increase resolution?

We want
to record
k-space



Fourier
Transform
↔

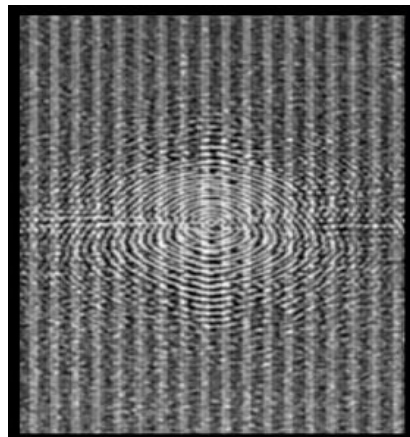


***BUT WHAT
ABOUT THE
SPEED
UP????***

To reconstruct our
images

*****See Lecture 3
by Vinai***

It would be great
to skip lines...

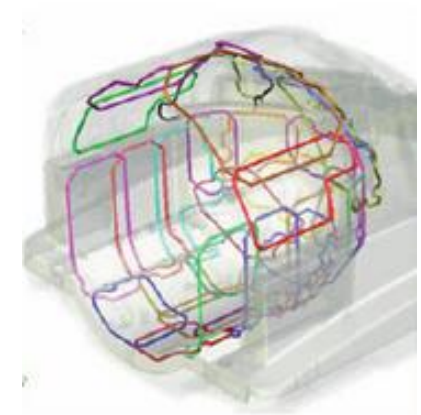
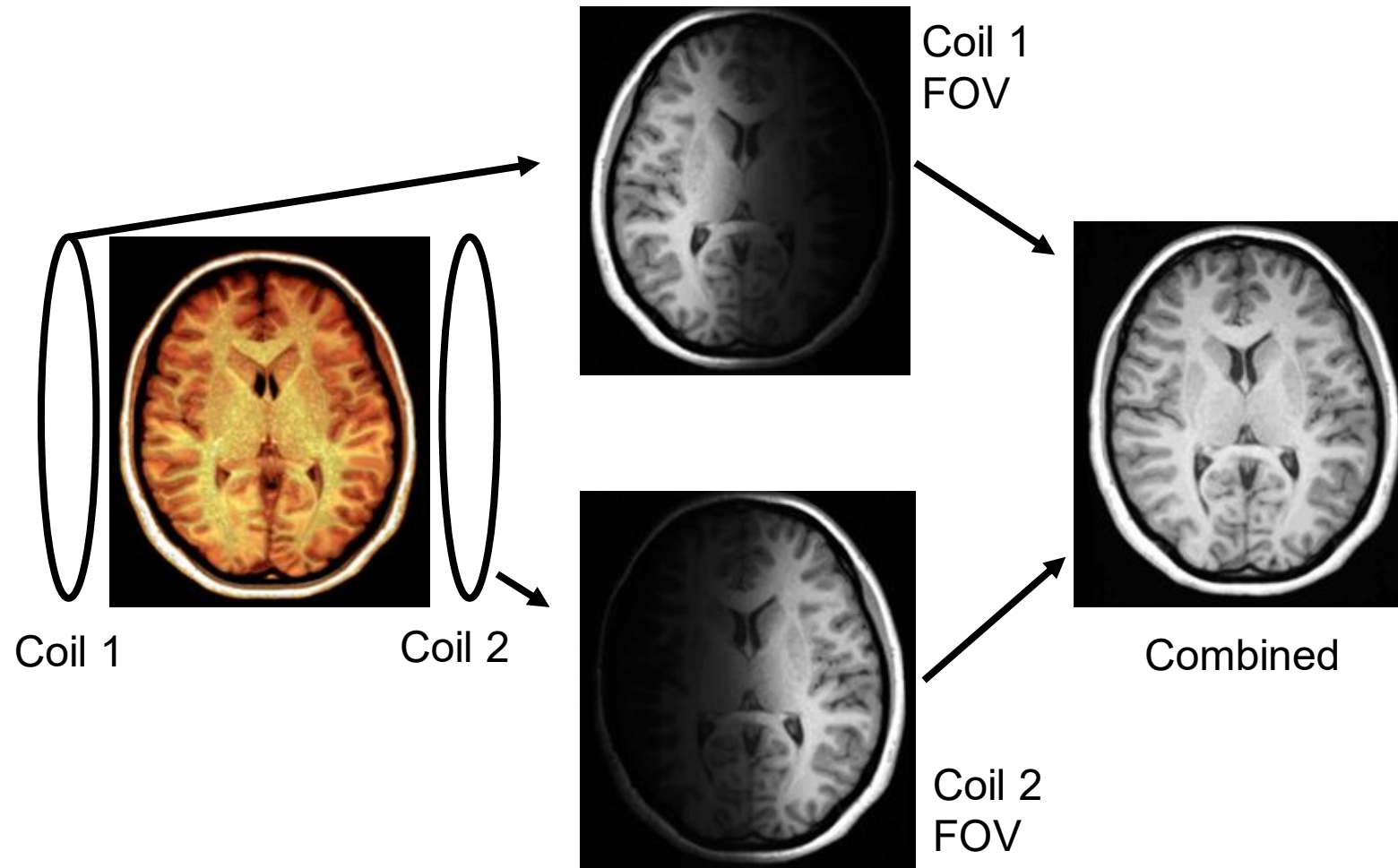


Fourier
Transform
↔

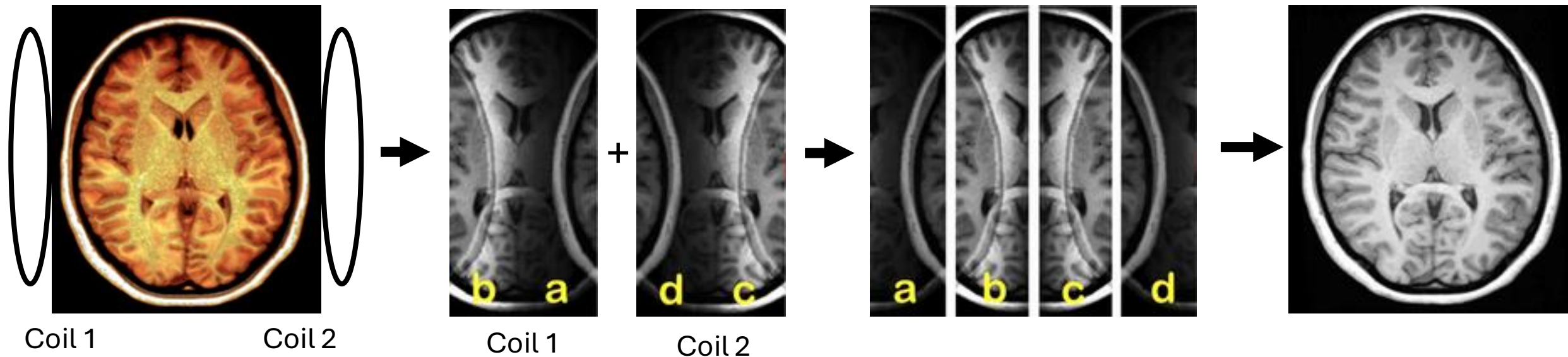


But then we are left
with reduced FOV and
wrapping artifacts!

Enter... Parallel Imaging



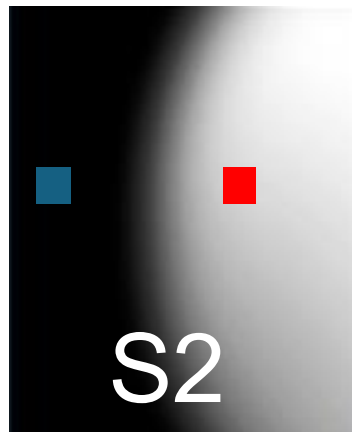
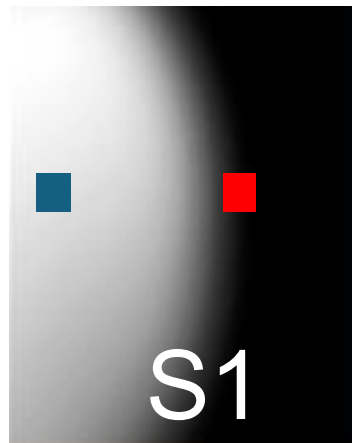
The Acceleration Problem



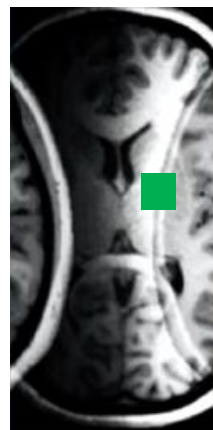
So how do we
go from this?

To this???

SENSE / ASSET



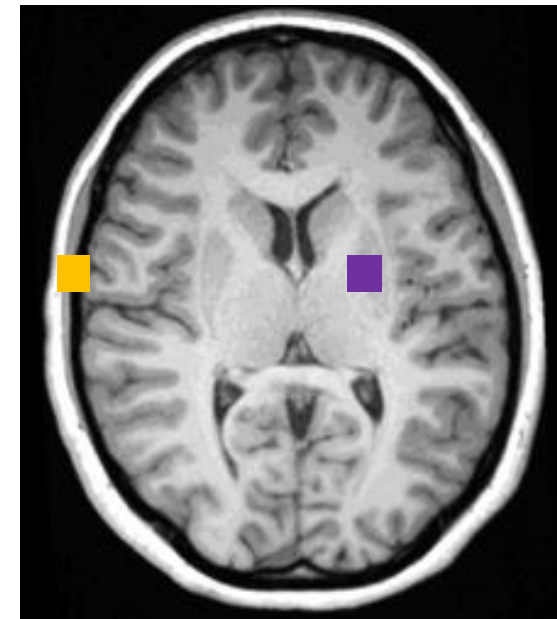
Coil Sensitivity Maps



Measured Images

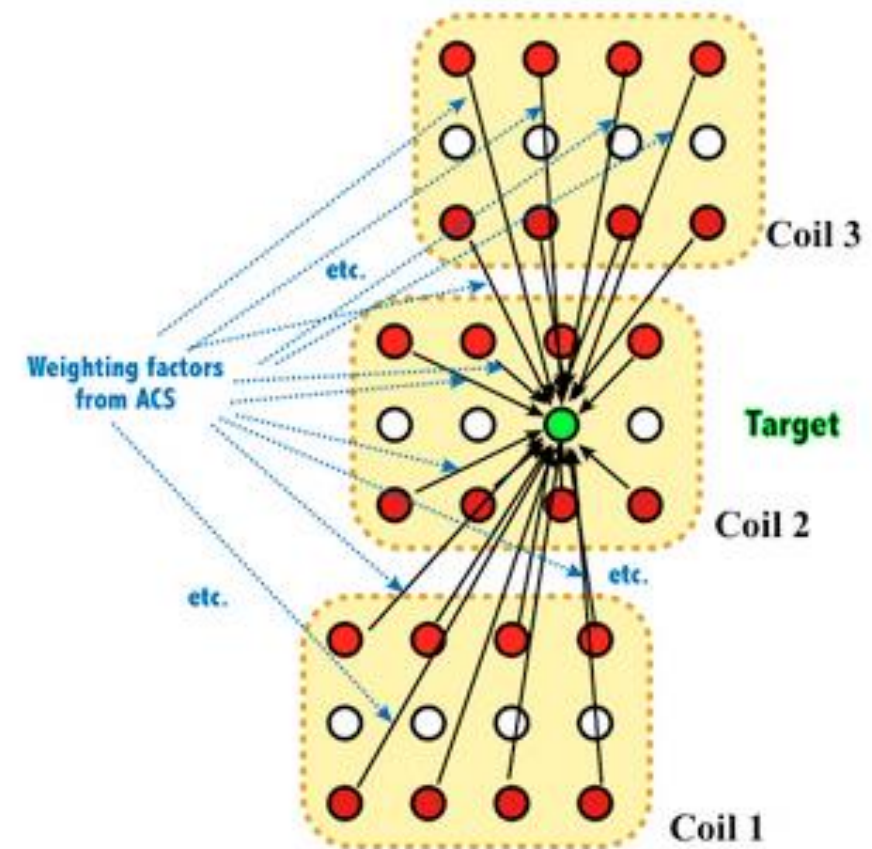
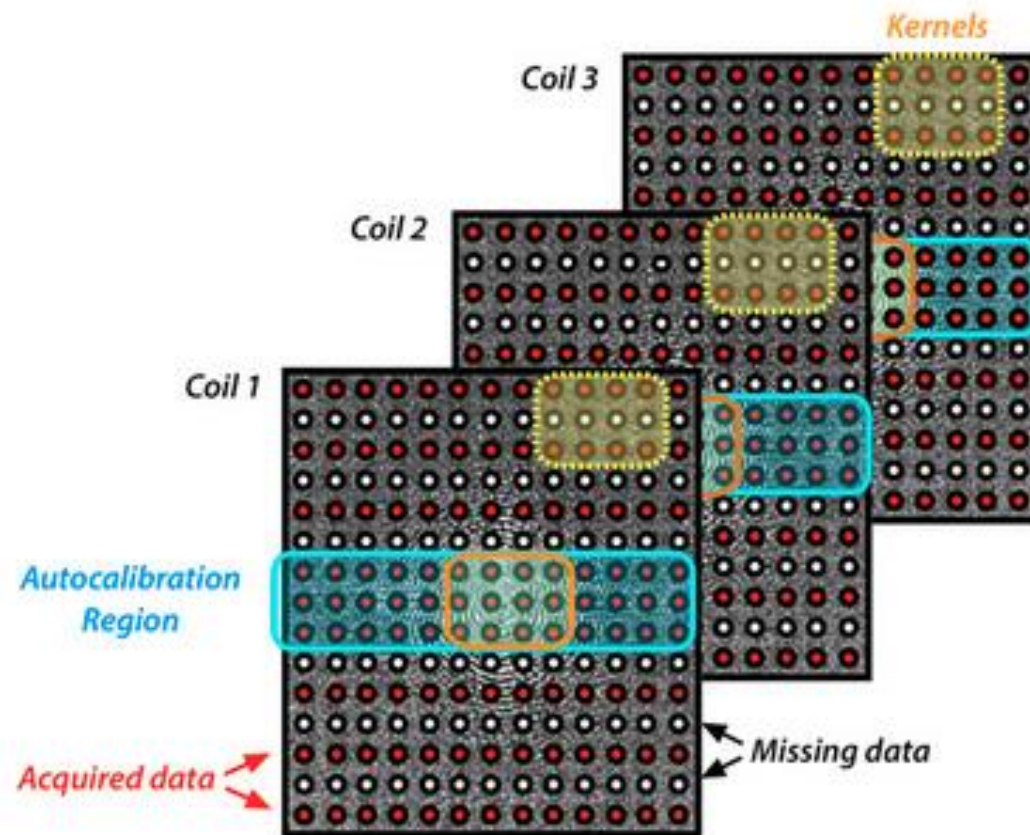
$$S1 \text{ (green square)} = \text{blue square} \cdot \text{yellow square} + \text{red square} \cdot \text{purple square}$$

$$S2 \text{ (green square)} = \text{blue square} \cdot \text{yellow square} + \text{red square} \cdot \text{purple square}$$



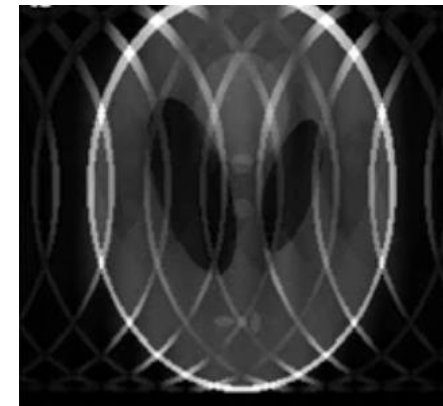
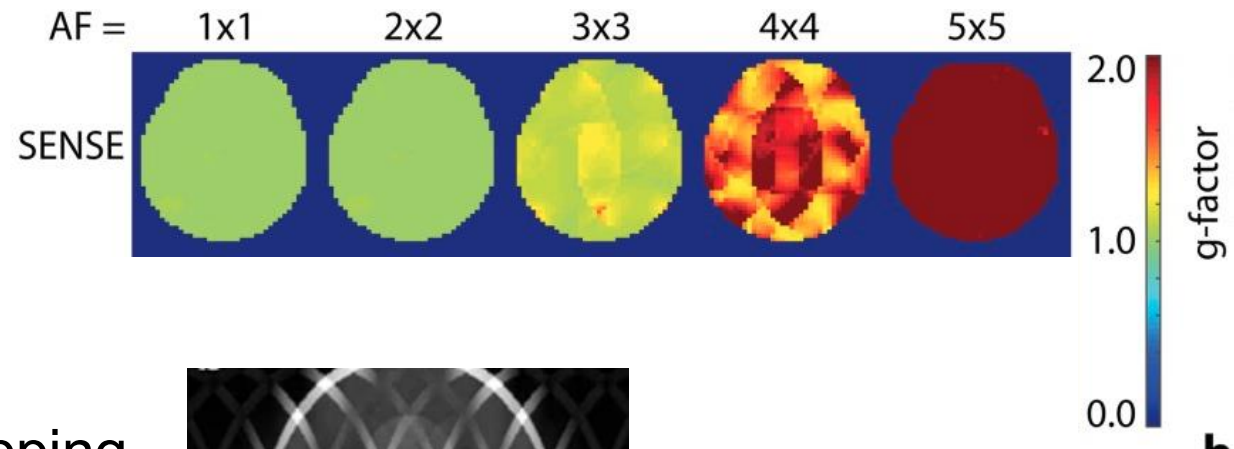
Full FOV Image

GRAPPA / ARC

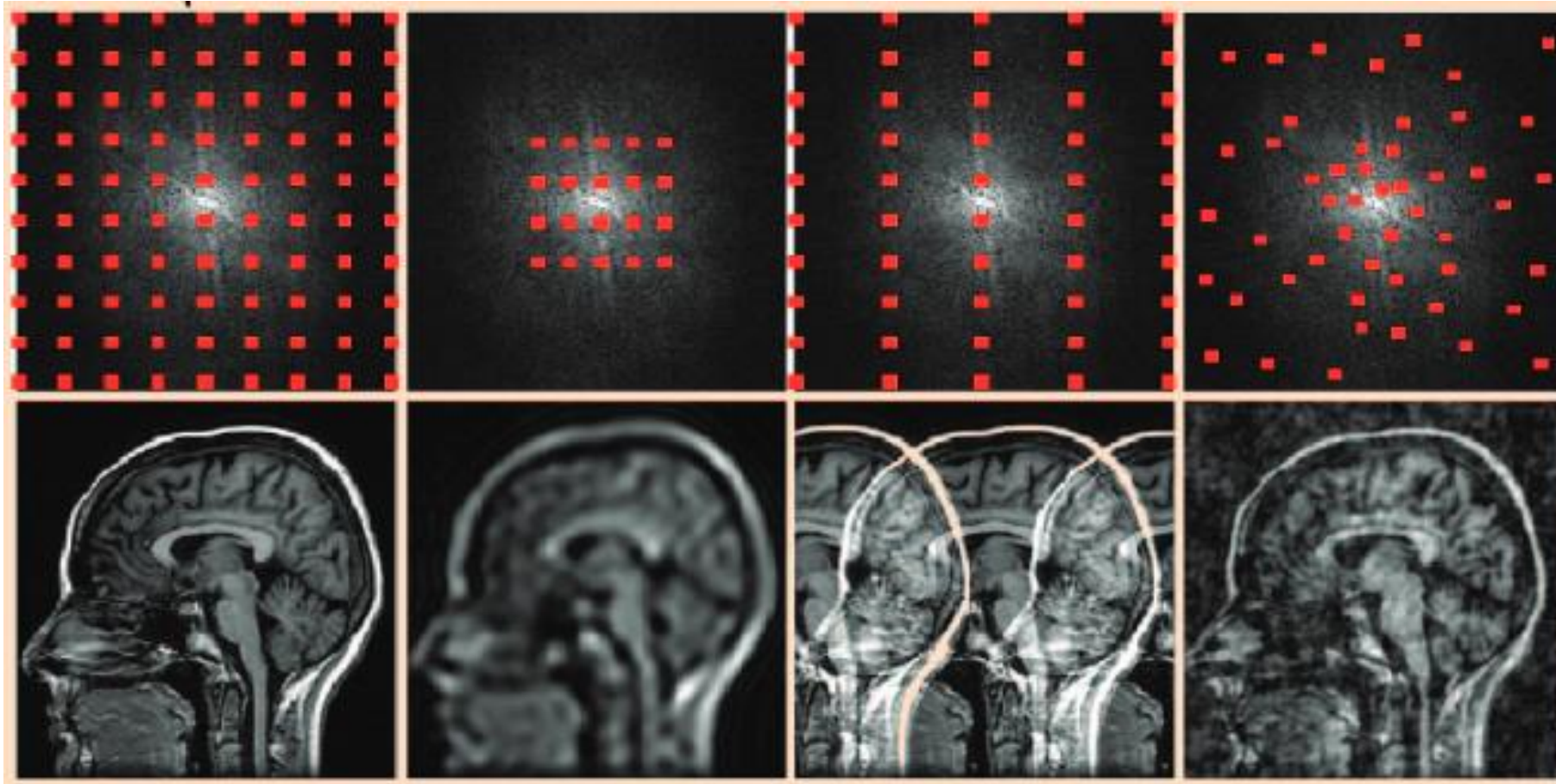


What are the limitations of acceleration?

- All Parallel Imaging techniques are limited by the number of receiver coils, and their arrangement!
- Noise is cumulative! Voxels with similar sensitivity across all coils are harder to untangle (G-Factor penalty).
- Algorithms are never perfect.... some wrapping artifacts will always be present

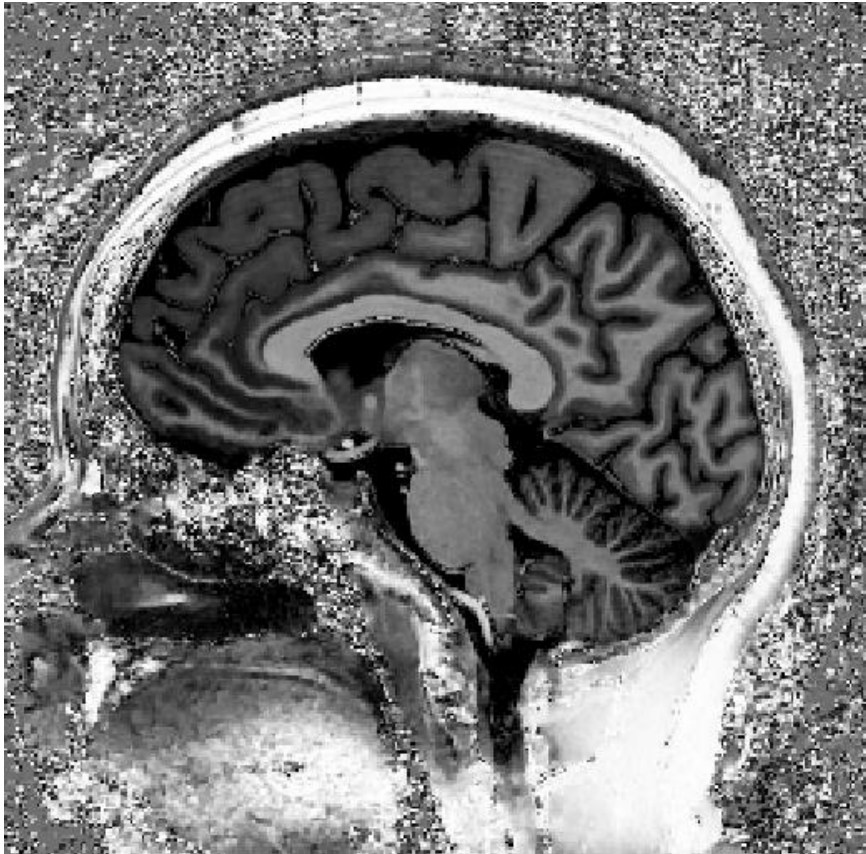


Reducing Artefact Coherence (Compressed Sensing)



Compressed Sensing (0.75 mm anatomical scans at NIH)

~18% of
k-space



CS – USx5.1
(6:04)

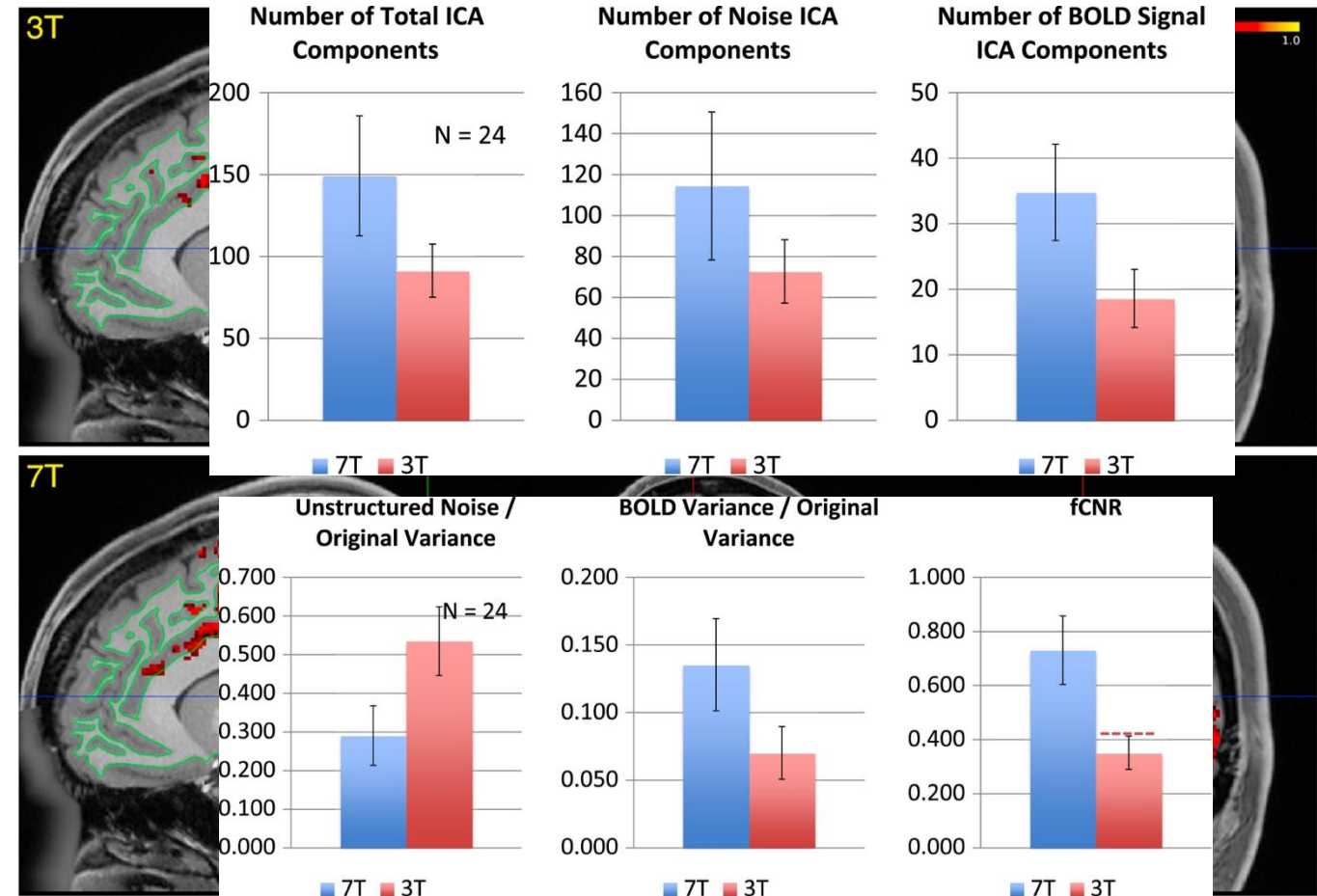
~35% of
k-space



GRAPPA 3
(9:37)

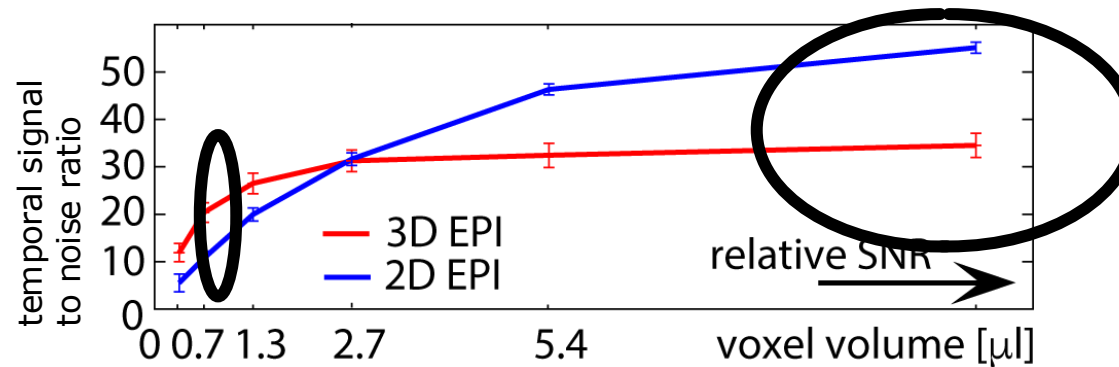
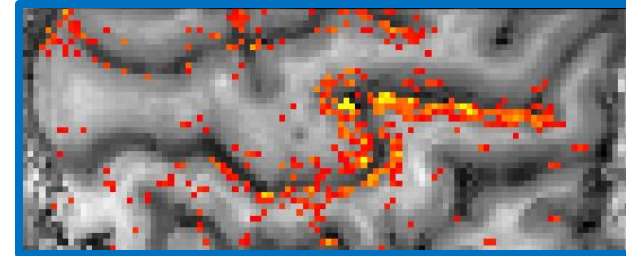
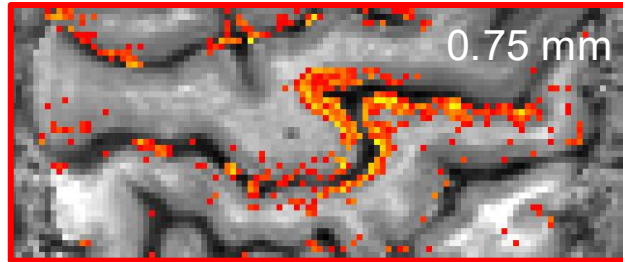
Okay, but is 7T better for fMRI?

- “*The physics*” show that 7T is better... but is it really better for fMRI?
- Generally, **yes**.
- 7T provides increased SNR and resolution, which often translates to:
 1. Better functional contrast
 2. More extensive functional components

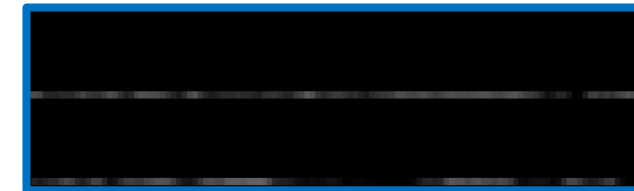


But we need to think about sequences!

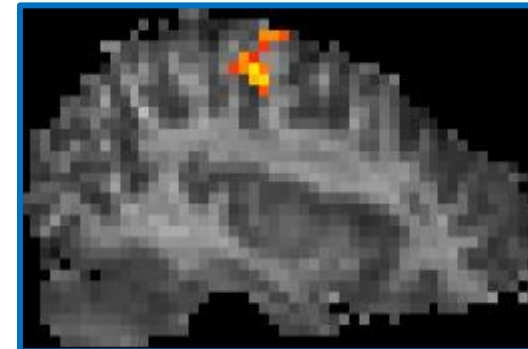
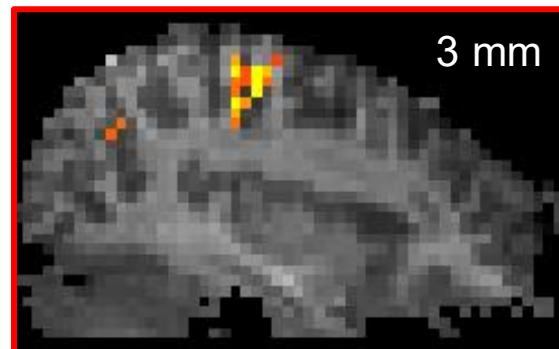
3D EPI



2D MB/SMS



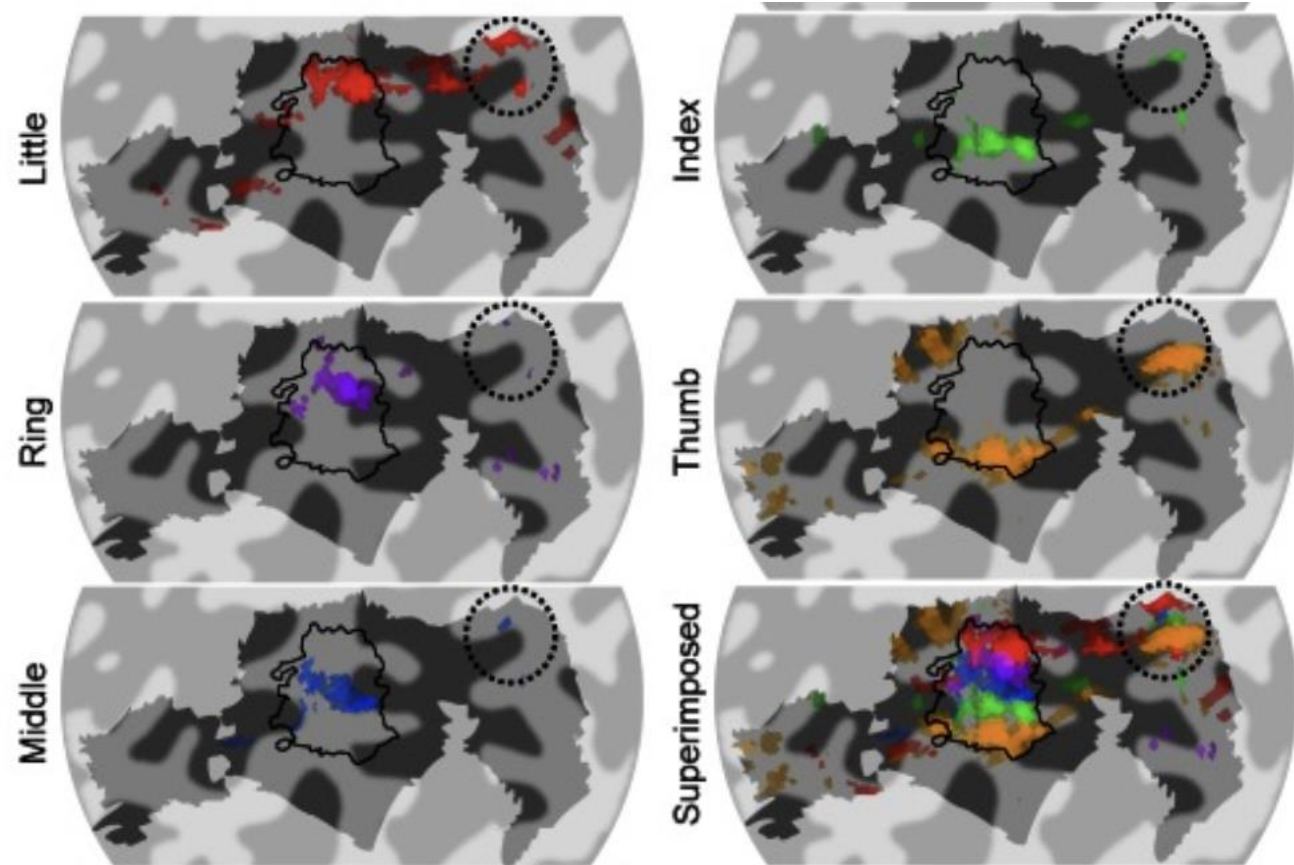
- Higher signal 😊
- but more motion artefacts 😞
- No slice timing
- Confusion between TR and “VAT”



- Lower signal 😞
- but fewer motion artefacts 😊
- Pretty standard processing

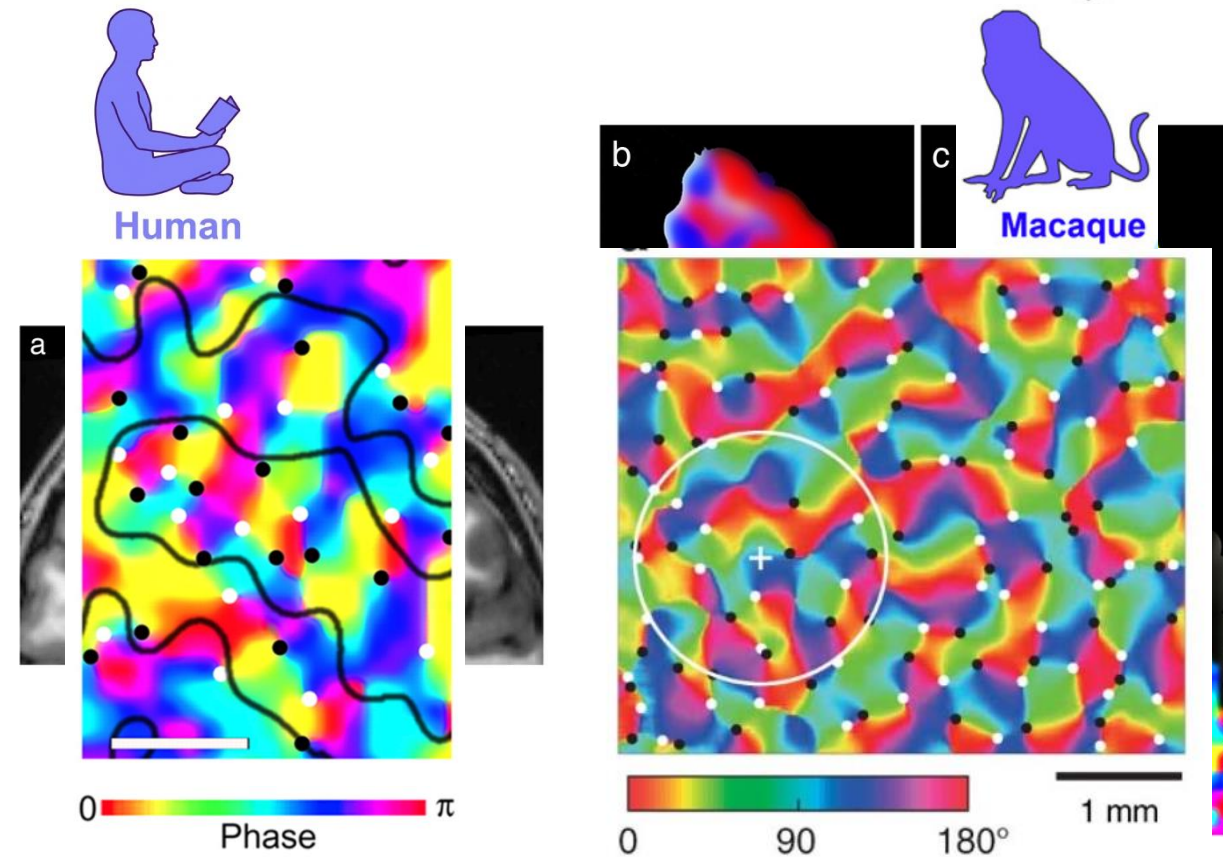
Cortical Columns in fMRI

- The specificity of 7T MRI enabled individual finger response mapping in single subjects
- These maps and subsequent experiments have provided valuable information on hand dystonia.



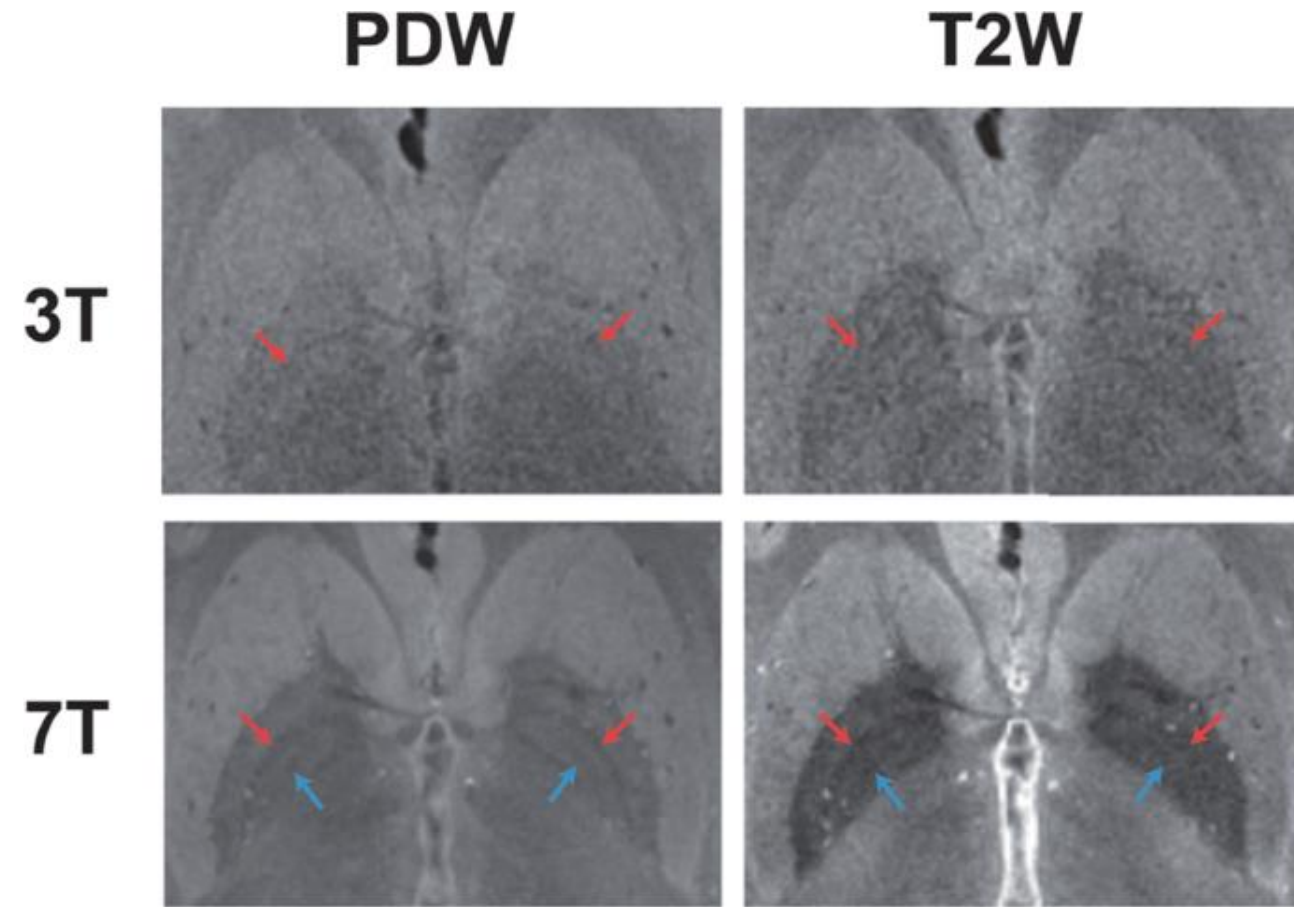
Cortical Columns in fMRI

- Yacoub (2008) showed that it was possible to see cortical columns using fMRI
- In a flat portion of cortex, they mapped ocular dominance and orientation selectivity in V1



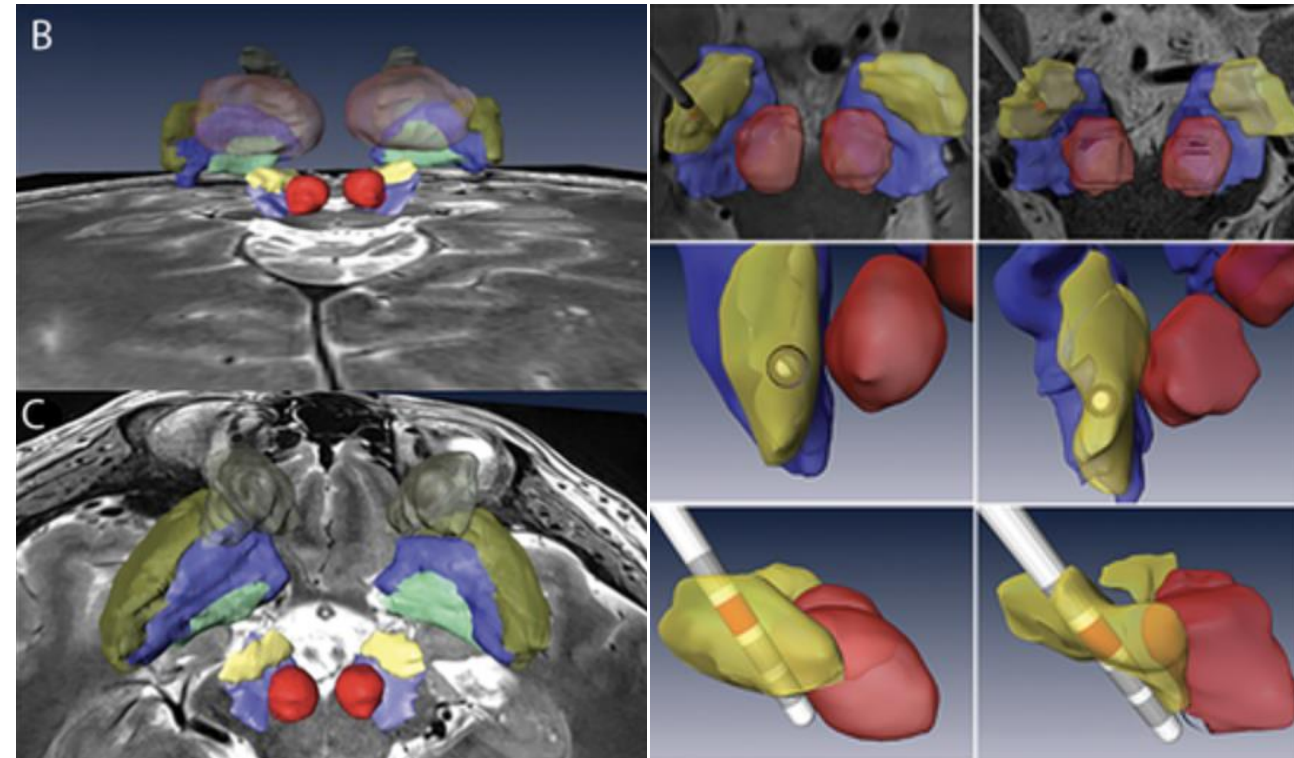
Anatomical Mapping of Small Brain Structures

- 7T MRI can be used to create detailed maps of subcortical structures.
- 7T can also deliver unprecedented detail via *ex vivo* brain mapping (100 μ m resolution)



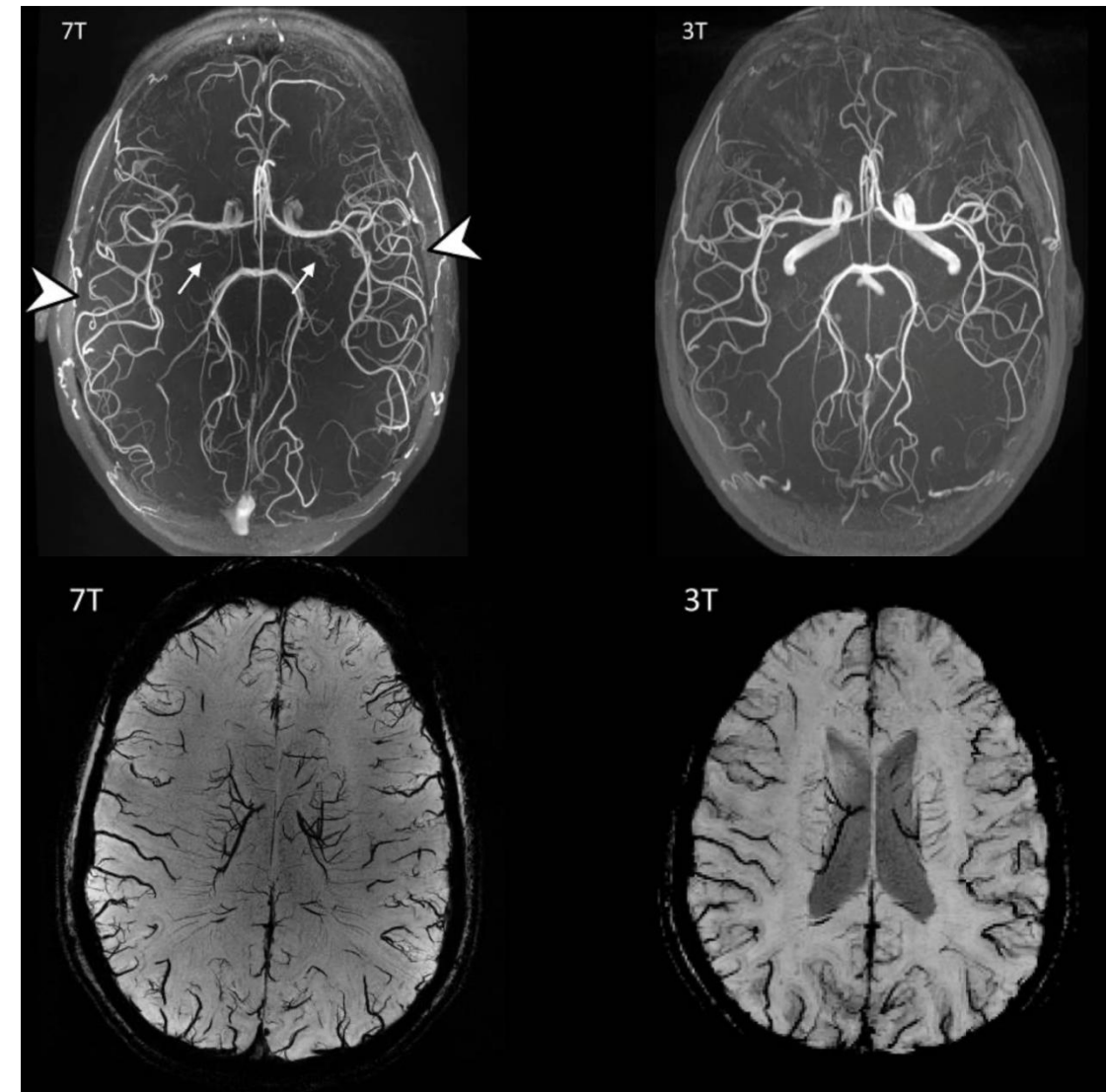
Clinical Use of 7T MRI

- 7T MRI is used in cases where high resolution is important for accurate diagnosis and treatment
- One example is surgical planning and confirmation of deep brain stimulation. This requires accurate differentiation of subthalamic nuclei from the substantia nigra.



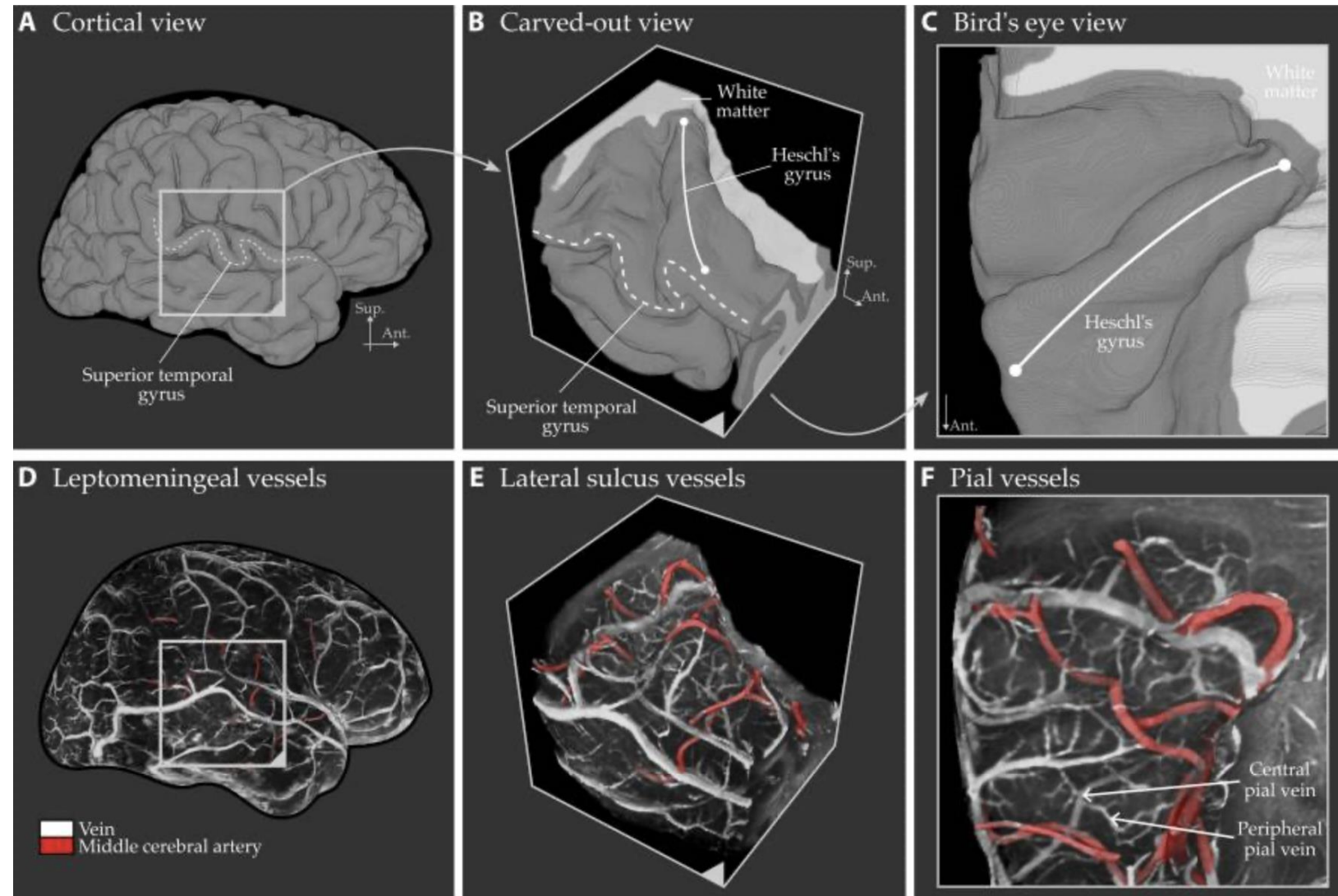
Clinical Use of 7T MRI

- 7T MRI is used in cases where high resolution is important for accurate diagnosis and treatment
- Other examples include stroke and small vessel disease, where the increased detail provided by 7T MRI can be very informative



Mesovein protocols

- Vascular protocols can also be used for neuroscientific questions
- Increasingly detail maps of arteries and veins is helping us better interpret fMRI signals by examining their sources

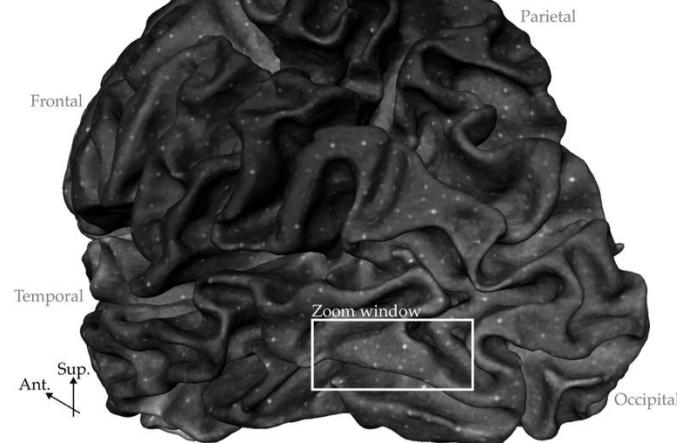


Mesovein protocols

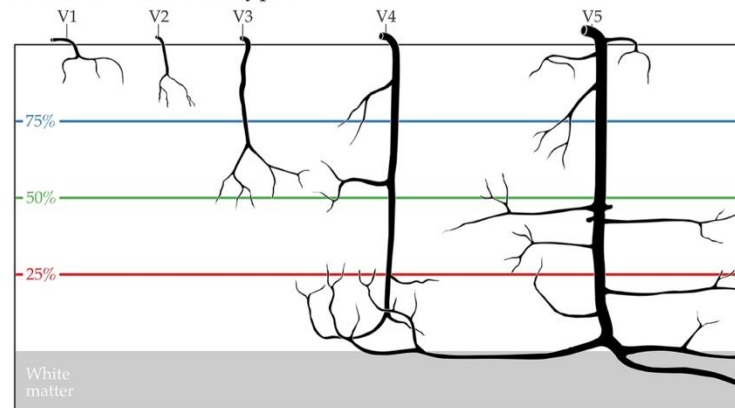
- Vascular protocols can also be used for neuroscientific questions
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A Lateral-posterior view cortical surface

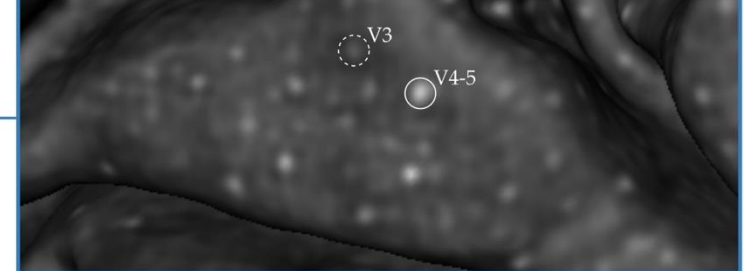
1/T₂*w contrast
Cortical depth 50%
(mid-thickness)



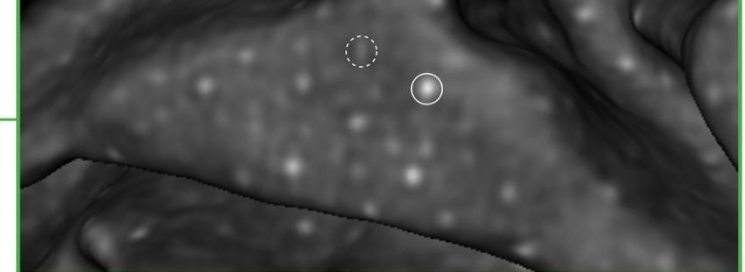
E Intracortical vein types



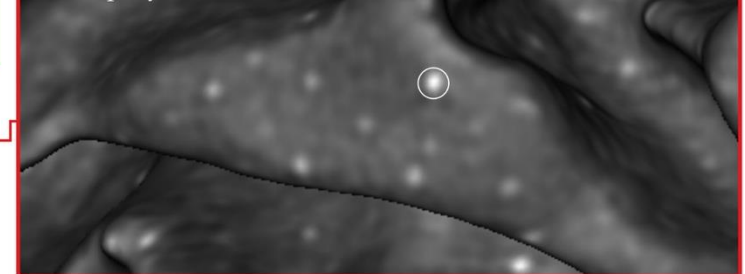
B Superficial layer



C Middle layer

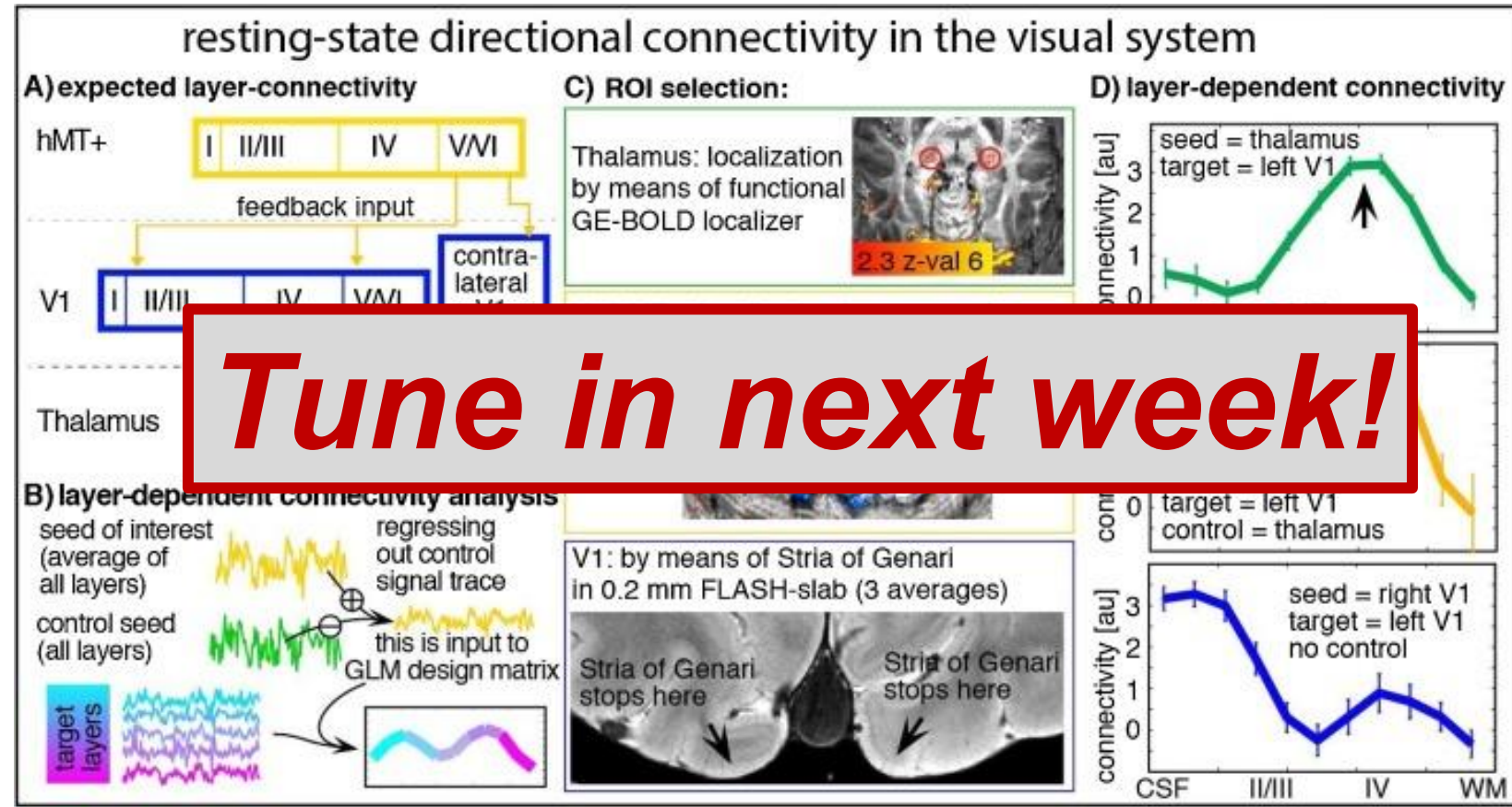


D Deep layer

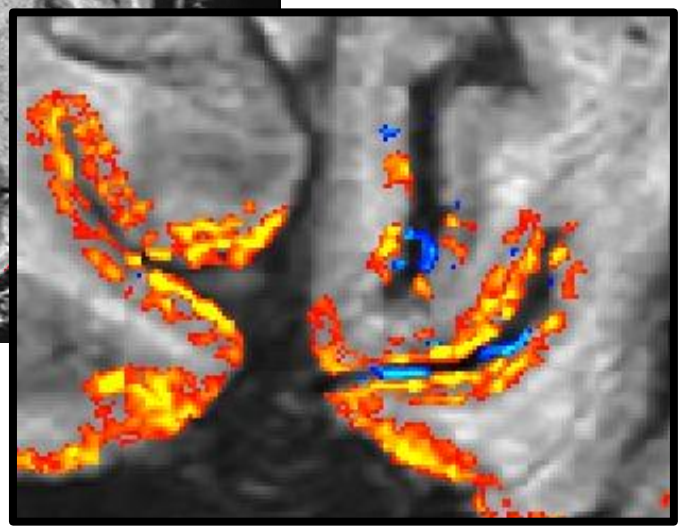
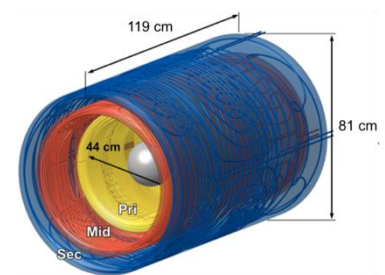
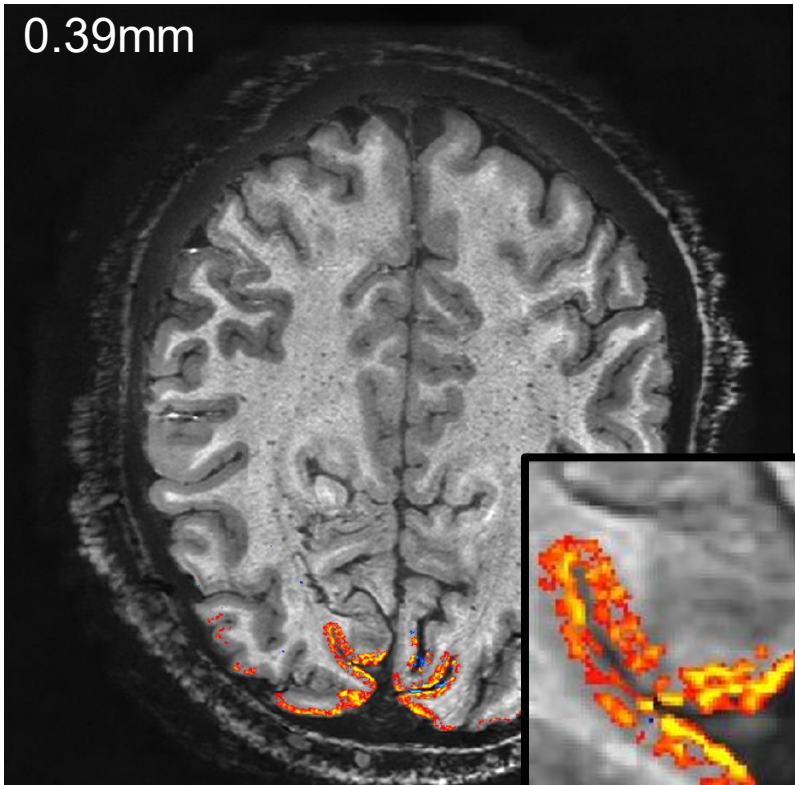


The Promise of Layer fMRI

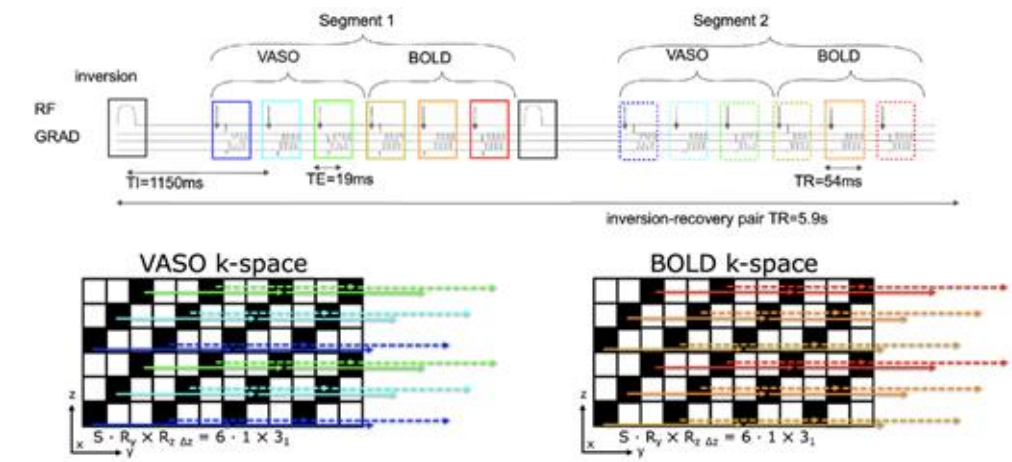
- There is a lot of excitement surrounding the field of Layer fMRI.
- One of the most promising areas is the idea that layer-specific connectivity patterns may provide clues to the direction of information flow in the human brain...



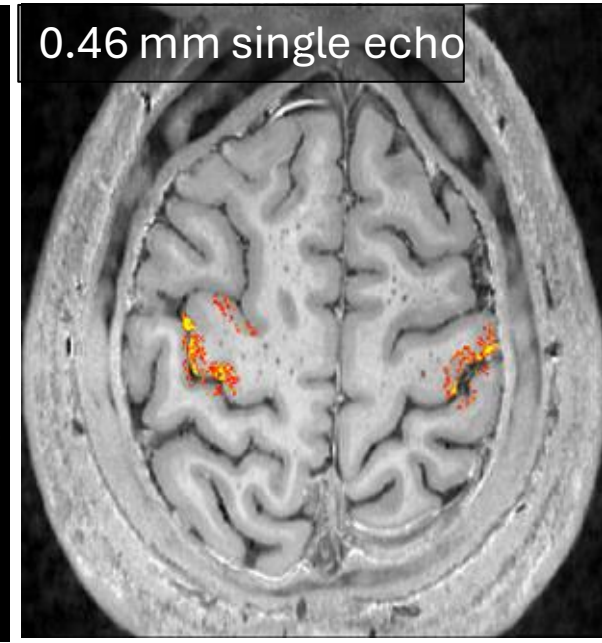
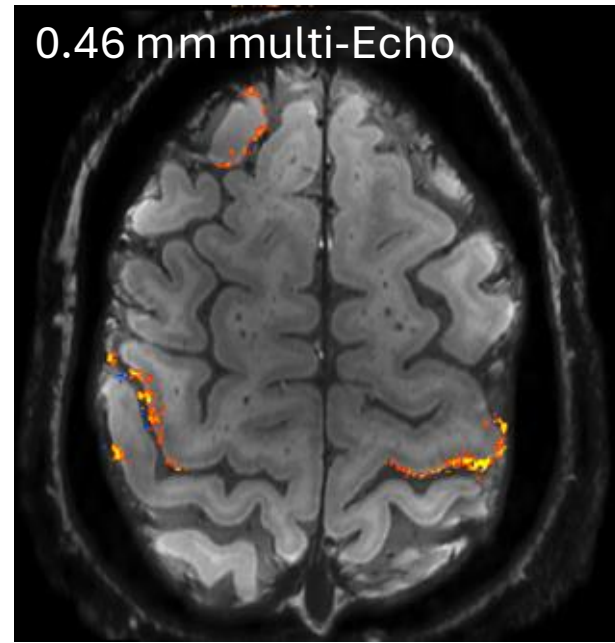
Future Steps to Improve 7T fMRI



NexGen 7T
UC Berkley



7TB



High Resolution fMRI Educational Resources

- ISMRM Conference
- ISMRM Brain Function & High Field Study Groups
- Layer fMRI Journal Club (<https://layerfmri.com/seminar/>)
- Layer fMRI Dinners (<https://layerfmri.com/dinners/>)

Cape Town - 2026 ISMRM-ISMRT Annual Meeting and Exhibition - 09-14 May 2026

Plenary Session Mesoscale MRI

← Back to the Program-at-a-Glance

Mesoscale MRI

Plenary Session

Plenaries

Wednesday, 13 May 2026

Plenary Hall (Halls 8-10) | CTICC 2

Session Number: 520-02

Moderators: Berkin Bilgic & Christopher Nguyen & Wietske Van der Zwaag

No CME/CE Credit



ISMRM Brain Function Study Group Member Forum

ISMRM Brain Function STUDY GROUP

These study group forums are now closed. Please visit the new platform for study

